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Relocation Impact: North Coast (Sutherland) Care Services: Impact on staff recruitment and retention



November 2017

Dr Colin Chandler



(Cover photoA897 Helmsdale to Melvich Road)

Preface

The purpose of this study was to explore the impact on staffing of the relocation of care facilities on the North Coast (Sutherland). The relocation of the two existing care homes (Melvich and Caladh Sona) to a new facility in the Tongue area raised questions around the ability to recruit and retain staff. This study was commissioned by Highland Health Board to address this question.

My thanks go to all the participants who gave freely of their time knowledge and opinions which informed the exploration of these issues.

November 2017

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Executive Summary

The North Coast Care Services in Sutherland address the needs of a population that is both sparse and remotely located in a challenging geographical area. Hence the context of this study is a key element to understanding the issues around staffing. The purpose of this study was to explore the impact on staffing of the relocation of care facilities on the North Coast (Sutherland). This relocation of the two existing care homes (Melvich and Caladh Sona) to a new facility in the Tongue area raised questions around the ability to recruit and retain staff.

Methods

An approach based on realist synthesis was used to explore both the context and specific issues presenting in this situation. The mixed methods approach enabled data to be collected pertaining to both context and the staffing issues. Staff and stakeholder interviews (11) were used to define and explore these issues in depth in conjunction with views expressed in the care home (18) and community staff (7) surveys. Existing records of recruitment and the consultation exercise, with quantitative data from published population sources, Census 2011, Scottish Health Survey, journey times from GIS; and limited primary quantitative data from care home and community staff surveys gave a description of the context and provided evidence to support or refute the issues raised from the qualitative data. Analysis involved an evidence synthesis approach where an iterative process identified and refined themes, through a purposive populating and testing of these themes from the primary and secondary data.

Context

The north coast of Sutherland was described as *“sparsely peopled ... rugged, roadless, and mountainous, and where not composed of islands is very largely peninsular on the seaboard, and inland is broken up by lakes and rivers. The weather conditions, too, and particularly in the winter-time, add enormously to the difficulties of travel”* in the Dewar report of 1912¹ a description which is largely true today with the possible exception of the road infrastructure, which is single track with passing places for extensive sections. This beautiful landscape borders on 6 designated wild areas of Scotland (SNH, 2014) and supports a population of around 1700 people living mainly in scattered communities along the coastal strip and south on the roads leading to Lairg or Helmsdale. The popularity of the area has increased greatly with the promotion of the North Coast 500 route (NC500). Whilst this increases tourist trade in the summer months, it can also overwhelm the road infrastructure causing additional delays for travel. This remote and rural area has a low crime rate, but also poor access to services.

Themes developed through the data synthesis

Travel

A major concern raised by some interviewees was the increased travel that would be required with the move to Tongue, particularly for those living in the east of the area (Melvich and surrounding areas). Responses to the care staff survey indicated that at present most staff travel to work by car (2 walk) and for 7 of the 18 respondents this is a journey of more than 20 minutes. For staff currently at Caladh Sona this would be less than an additional 10 minutes to access Tongue, but for staff currently at Melvich up to a further 40 minutes. These times could be increased by tourists in the summer or animals and ice in the winter. However, community staff travel the area at all times of year, typically covering distances in excess of 100 miles in a day. A few survey respondents and

¹ Dewar Report (1912) http://www.elib.scot.nhs.uk/Upload/Dewar_Report.pdf

interviewees indicated that they would be unwilling to travel to the new facility but most were quite accepting of the change.

R1: Pressure should be put on Highland council to maintain and improve roads (especially between Bettyhill and Tongue) and improve signage to encourage better behaviour by those unfamiliar with single track roads.

Recruitment

Divergent views were expressed over recruitment with many negative views linked to a reluctance to change. Local recruitment will draw on relatively small populations, but with limited job opportunities in the area many of which are seasonal, the views expressed indicated that there is an available pool to recruit from. Just over 50% of the care staff who responded to the survey had always lived in the area or had moved back to the area having previously lived there, the remainder had chosen to move in from other areas. Local adverts and word of mouth were the main routes by which local staff were made aware of job opportunities. Around half of the survey respondents had other employment, voluntary or paid in addition to work at the care home. Suggestions were made in the interviews around using marketing strategies to encourage interest from applicants further afield, perhaps relevant to more senior health and social care posts. The recruitment process was reported as very positive by the majority of survey respondents, though some concern was expressed around the delays in taking up the post following interview, also how the interest of those who were not successful could be maintained and encouraged for later opportunities. Community links, work experience and placement opportunities were seen as beneficial in encouraging people into this area of work.

R2: Continue to adapt the advertisement and recruitment process to the local and more distant pools of potential applicants

Retention

Two thirds of the survey respondents were over 50 and most respondents expressed satisfaction with the work they were undertaking. Though some concerns expressed by staff over how they were valued, this was evident through: 1. The concern expressed over pay and remuneration; 2. Appointments on fixed term contracts; 3. The support for the professional nature of the health and social care work; and 4. The dominance of the cost cutting climate that leads to posts being downgraded whilst the same level and responsibility of work is maintained. Flexibility within the work pattern, where possible, was appreciated. Views were expressed that a number of the Melvich staff would look for more local work in the period up to the move rather than travel, this may lead to staffing challenges in this period.

R3: Explore ways in which the value of staff can be acknowledged and supported through security of contract, remuneration and status.

R4: Proactively plan and manage staffing during the transition period.

Development

Training and development opportunities were mainly focussed on meeting the requirements for the roles (SVQs and mandatory training). Some interest was expressed in wider development opportunities, but were often challenged by the time required to travel and attend more distant locations, whilst maintaining service delivery.

R5: Explore the possibility of more local delivery / access to training and learning to encourage staff to develop in place.

Conclusion

Recruitment in the health and social care sector nationally is challenging at all levels, demand exceeds supply. However, in the context of the small population on the North Coast of Sutherland, both opinion and evidence suggest that a pool of people exist who can be attracted into these posts. Recruitment will require imaginative approaches to encourage applications, both local and from wider afield. Retention of existing and new staff will require an environment which values and supports their work at all levels and develops their potential.

Introduction

The North Coast Care Services in Sutherland address the needs of a population that is both sparse and remotely located in a challenging geographical area. Hence the context of this study is a key element to understanding the issues around staffing. The purpose of this study was to explore the impact on staffing of the relocation of care facilities on the North Coast (Sutherland). The relocation of the two existing care homes (Melvich and Caladh Sona) to a new facility in the Tongue area raised questions around the ability to recruit and retain staff. This has been conceptualised in the following research questions, which provided the starting point of the study:

1. What has been the extent of the staffing challenges in these two facilities (and other health and social care resources) over the past 2 – 5 years?
2. What are the root causes of these staffing challenges and will they be eased or compounded in a new facility in a different location?
3. Will additional staffing challenges be experienced or reduced in a different location?
4. What are the specific implications of closing/moving either facility and the impact this will have on staffing, and how might any difficulties be addressed?

These questions about recruitment and retention sit in the context of the Scottish Government *Health and Social Care Delivery Plan* (2016)² which aims to build up capacity in primary and community care and support the development of new models of care across Scotland. In Highland, the 2008 government report on *Delivering for Remote and Rural Healthcare*³ is particularly pertinent. It sets out a framework for sustainable health care in remote and Rural Scotland supporting *the interdependence and integration of services to support access to healthcare* (and social care due to the integration agenda) *which is as local as possible*. Hence the mandate to deliver services on the North Coast of Sutherland is strong.

Nationally recruitment into the Healthcare professions is difficult, recent reports by the BMA⁴ and RCN⁵ illustrate a lack of Doctors and Nurses in training and available within the workforce. The RCN estimate that 30% current nursing workforce will reach retirement age within the next 10 years.

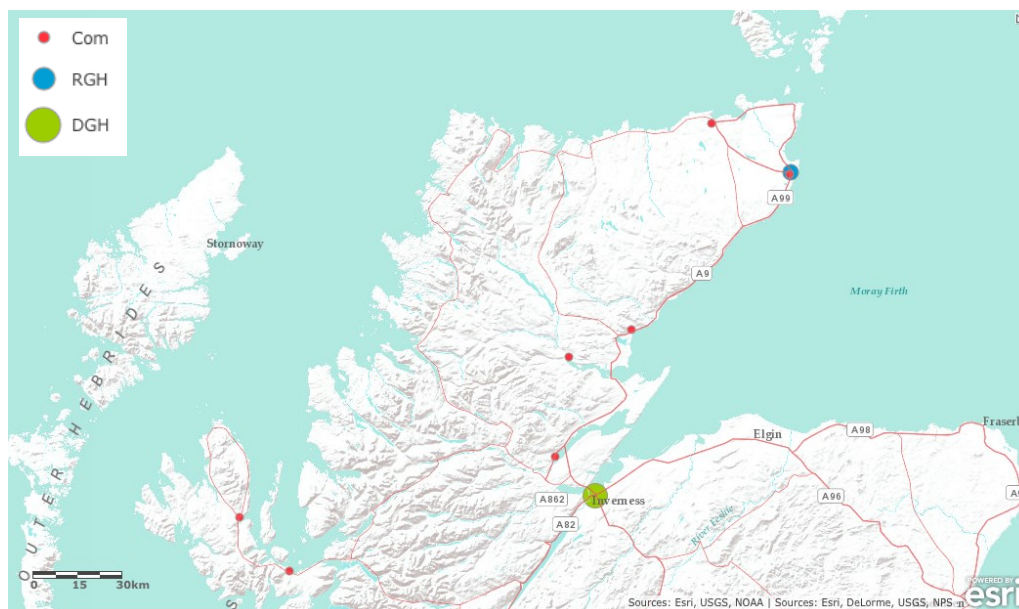


Figure 1 Hospital locations in Northern areas of Highland (DGH – District General Hospital, RGH – Rural General Hospital, Com – Community Hospital)

² Scottish Government (2016) Health and Social Care Delivery Plan

³ Scottish Government (2008) Delivering for remote and rural healthcare

⁴ BMA (2017) State of pre and post-graduate medical recruitment in England.

⁵ RCN (2017) Safe and effective staffing: Nursing against the odds

Respondents to this study have expressed concern over the future of GP services in North Sutherland. The following quotes illustrate their concerns.

... it certainly has a knock-on effect as well because our precarious situation with GPs, and people of our communities will not listen to the fact that because we have three GPs in the Tongue and Armadale practices, that were stable and that's all fine but the reality is within five years all of them are likely to have retired. Then you'll be in the same position as Durness and Scourie where they have a different locum every four or five days, which really puts a huge emphasis on lack of continuity of care and puts an even bigger responsibility on the nursing team and local primary team.

and

... staffing it's no different to anywhere else, just get on with it and stop faffing around.

With respect to social care staff, recruitment to the more junior levels tends to draw on the local population and provide welcome employment in an area of sparse opportunities.

Methods

The North Coast Care Services in Sutherland are placed in a remote and challenging geographical area of sparse population. The context of this study is key to understanding the issues around staffing. An approach based on realistic evaluation⁶ was used to explore both the context and specific issues presenting in this situation. Mixed methods enabled data to be collected pertaining to both context and the staffing issues. Staff and stakeholder interviews (11) were used to define and explore these issues in depth in conjunction with views expressed in the care home (18) and community staff (7) surveys. Existing records of recruitment and the consultation exercise, with quantitative data from published population sources, Census 2011, Department of Transport, journey times from GIS; and limited primary quantitative data from care home and community staff surveys gave a description of the context and provided evidence to support or refute the issues raised from the qualitative data. Analysis involved an evidence synthesis approach⁷ where an iterative process identified and refined themes, purposively populating and testing of these themes from the primary and secondary data.

Ethical approval for the study was obtained through the University of Edinburgh and the study registered with NHS Highland R&D office.

Context

The north coast of Sutherland was described as “*sparsely peopled ... rugged, roadless, and mountainous, and where not composed of islands is very largely peninsular on the seaboard, and inland is broken up by lakes and rivers. The weather conditions, too, and particularly in the winter-time, add enormously to the difficulties of travel*” in the Dewar report of 1912⁸ a description which is largely true today with the possible exception of the road infrastructure, which is single track with passing places for extensive sections. This beautiful landscape borders on 6 designated wild areas of

⁶ Pawson and Tilley (1997) Realistic Evaluation, Sage , London

⁷ Cooper et al (2017) Protocol for a realist review of complex interventions to prevent adolescents from engaging in multiple risk behaviours. BMJ Open2017;7:e015477

⁸ Dewar Report (1912) http://www.elib.scot.nhs.uk/Upload/Dewar_Report.pdf

Scotland⁹ and supports a population of around 1700 people living mainly in scattered communities along the coastal strip and the roads leading south to Lairg or Helmsdale. One hundred and forty children attend the local primary and secondary schools. Access to the area is limited by the road infrastructure, travelling East along the coast Thurso and Wick with their larger populations (6000 - 7000 each) and range of services (shops, hospitals etc.). However further west along the coast residents are likely to travel south to Lairg, Dingwall or Inverness to access a greater range of resources. The North Coast of Sutherland is a remote and rural area with a low crime rate, but also poor access to services.

The popularity of the area has increased greatly with the promotion of the North Coast 500 route (NC500). This route circumnavigates the highlands North of Inverness encompassing the coasts of Wester Ross, Sutherland (West and North), Caithness and Easter Ross before returning to Inverness. A total route in excess of 500 miles which Visit Scotland describe as *Never ending back roads, wide meandering country tracks and beautiful bends through some of Scotland's finest coastal scenery*.¹⁰ Whilst this increases tourist trade in the summer months, it can also overwhelm the road infrastructure causing additional delays for travel and increasing damage to the roads themselves.



Figure 2 Route of North Coast 500¹¹

⁹ SNH, 2014 <https://www.snh.scot/sites/default/files/2017-06/A1323225%20-%20Wild%20land%202014%20-%20Phase%203%20-%2020%20Wild%20land%20areas%202014%20-%20web%20site.pdf>

¹⁰ Visit Scotland: <https://www.visitscotland.com/see-do/tours/driving-road-trips/north-coast-500/>

¹¹ <http://www.northcoast500.com/interactive-map.aspx>

Major themes developed through the data synthesis

The initial research questions formed the basis of the staff and stakeholder interviews which identified issues and further questions. These were explored in the care home staff and community staff surveys. Secondary data were used to support or refute the resultant arguments and make sense of the sometime conflicting views of the participants.

Travel

The existing staff expressed concerns over the implications for their travel and presented this as an issue that would influence their decision to work in the new location, seek other employment or retire. The major concern raised by some interviewees was the increased travel that would be required with the move to Tongue, particularly for those living in the east of the area (Melvich and surrounding areas). One of the respondents from the Melvich area commented:

Here in the unit (Melvich) a lot of that staff come from Caithness they're not necessarily from the Melvich area so to go further west you know, I think people see that as scaremongering, but I think it's a genuine issue if you can go and work in a unit in Thurso you are just 18 miles and once you're in Reay roads are targeted by the Dounreay gritters for the winter and also you're on double track road the whole time whereas the other way you're on singletrack road a lot of time so I think, you know, people are weighing it up. Even just the cost of changing bases is quite significant for staff I would think.

Responses to the care staff survey indicated that at present most staff travel to work by car (2 walk) and for 7 of the 18 respondents this is a journey of more than 20 minutes. For staff currently at Caladh Sona this would be an additional 10 – 15 minutes to access Tongue, but for staff currently at Melvich up to a further 46 minutes. Bettyhill is 25 minutes drive time from Tongue. (See Table 1 and Figure 3).

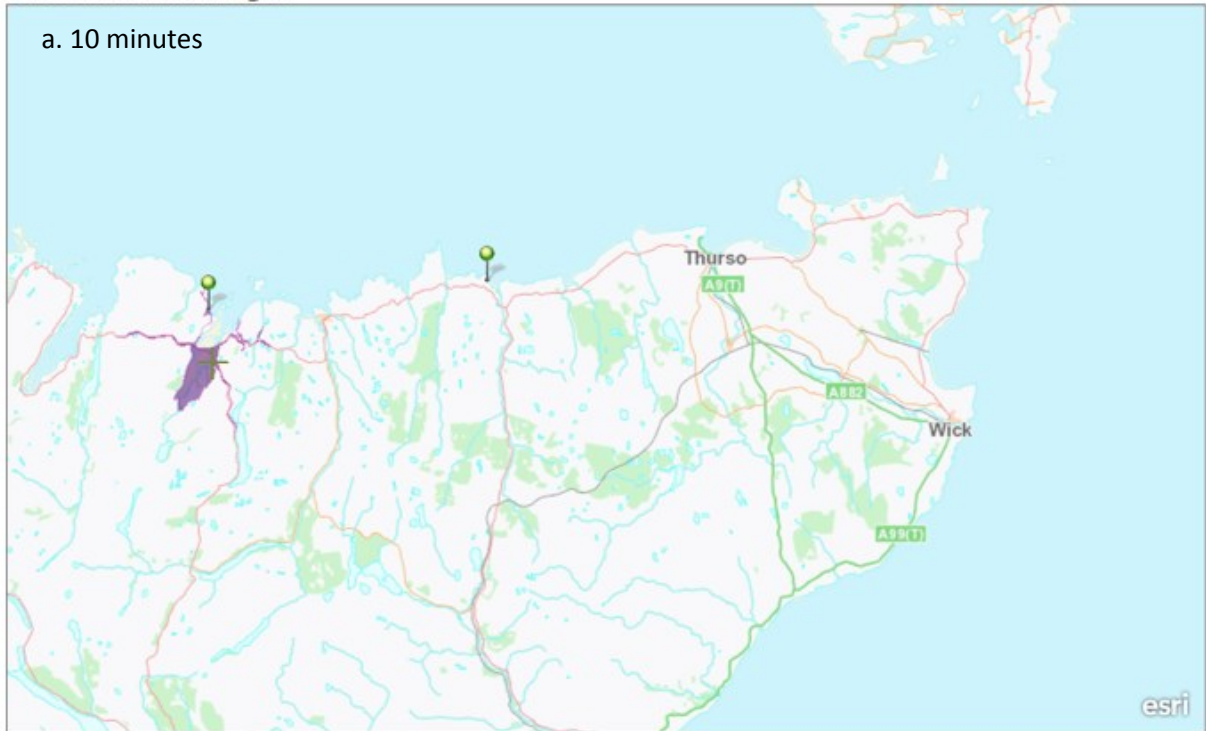
Table 1: Travel times by car and distances to Tongue¹²

From	Time (minutes)	Distance (miles)
Melness	13	6
Melvich	46	26
Bettyhill	25	13
Durness	55	29
Strathy	42	23
Thurso	71	43

¹² RAC Route Planner <https://www.rac.co.uk/route-planner/>

Drive times from Tongue

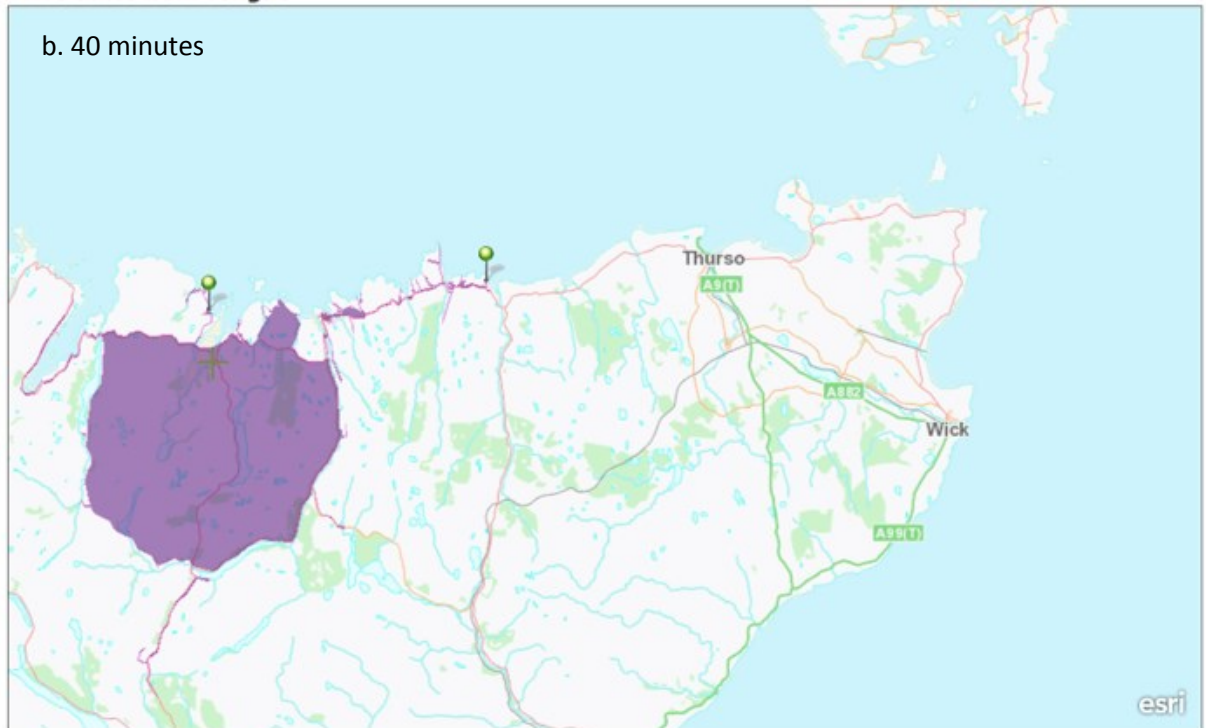
a. 10 minutes



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Drive times from Tongue

b. 40 minutes



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Figure 3 Shaded areas indicate the drive times from Tongue a. 10 minutes, b. 40 minutes. The pins indicate the current locations of Caladh Sona to the west, and Melvich to the east.

These times could be increased by tourists in the summer, many travelling the NC500 are clearly unfamiliar with driving on these roads and are probably driving unfamiliar vehicles (especially campervans). Many international tourists visit the area for whom coming off a stretch of single track road intuitively leads them to drive on the wrong side of the road.

... it's the tourists who don't know which side of the road to drive on

Clear signage indicating the need to let traffic pass may help, signage of this type is not uncommon further south in the Highlands.

The stretch of road between Bettyhill and Tongue was commonly described as difficult with the hazards of animals and ice in the winter. This stretch of road requires maintenance and improvement as the road edges are giving way. It is also a stretch with steep hills and bends which the respondents report as prone to icing. The roads are gritted in winter when needed, but this is usually timed to cover school traffic, which is too late for those travelling to an early shift and does not cover weekends.

... a member of staff with 4 accidents over winter travelling Melvich to Calladh Sona (2 on ice and 2 deer). Noted that for early and late shifts roads are not gritted. Also, no gritting at weekends - therefore challenging travel.

... so you're leaving early at night (for a night shift) and you're leaving late, arriving home late in the morning. The road is OK in the summertime, in the winter it's horrendous, the amount of accidents that are on that road, stags.

Yes, worked in Calladh Sona she's now in ..., she had 3 accidents on that road, one was the snow and the other 2 were stags.

Conversely:

I know concerns have been said because folk are unwilling to travel that has been raised from one area to another area but it isn't borne out one (travels) 24 miles from here and she didn't bat an eyelid at it. One of the others, two nights a week ..., comes (29 miles) and she loves it and says she will do it till she retires. So it's not borne out this misgiving about folk not being prepared to travel.

There's not really a problem of deer on the north coast whoever said that there is rather over egging it.

Department of transport data¹³ shows 40 reported road traffic accidents between Reay and Durness over the period 2010 – 2016 (see Figure 4). The majority of these were slight accidents (29), only 4 involved animals. Ten out of the 17 winter accidents involved frost, ice or snow. Whilst this does support the concerns over snow, ice and animals on the road, these are small numbers of accidents reported over a period of seven years considering the number of journeys undertaken on those roads over that period.

In that area, community staff travel at all times of the year, typically covering distances in excess of 100 miles in a day. As evidenced by another respondent:

... but as for people saying you can't get to work, the nurses are doing that all the time and every day and the care at home workers are getting to their clients every day and people travel from here to Dounreay every day.

¹³ Department of Transport <https://data.gov.uk/dataset/road-accidents-safety-data>

Further comments support travel as an integral part of rural life.

Well a lot of people travel in and out every day from here (Tongue) to Dounreay. Travelling is a part of the job. Jobs change and you just have to go with that.

People can't say they can't get over the hill, people are doing it all the time, but Highlands council could be asked to do better with gritting and signage.

People up here are used to travelling, I went to Inverness yesterday that took the whole day.

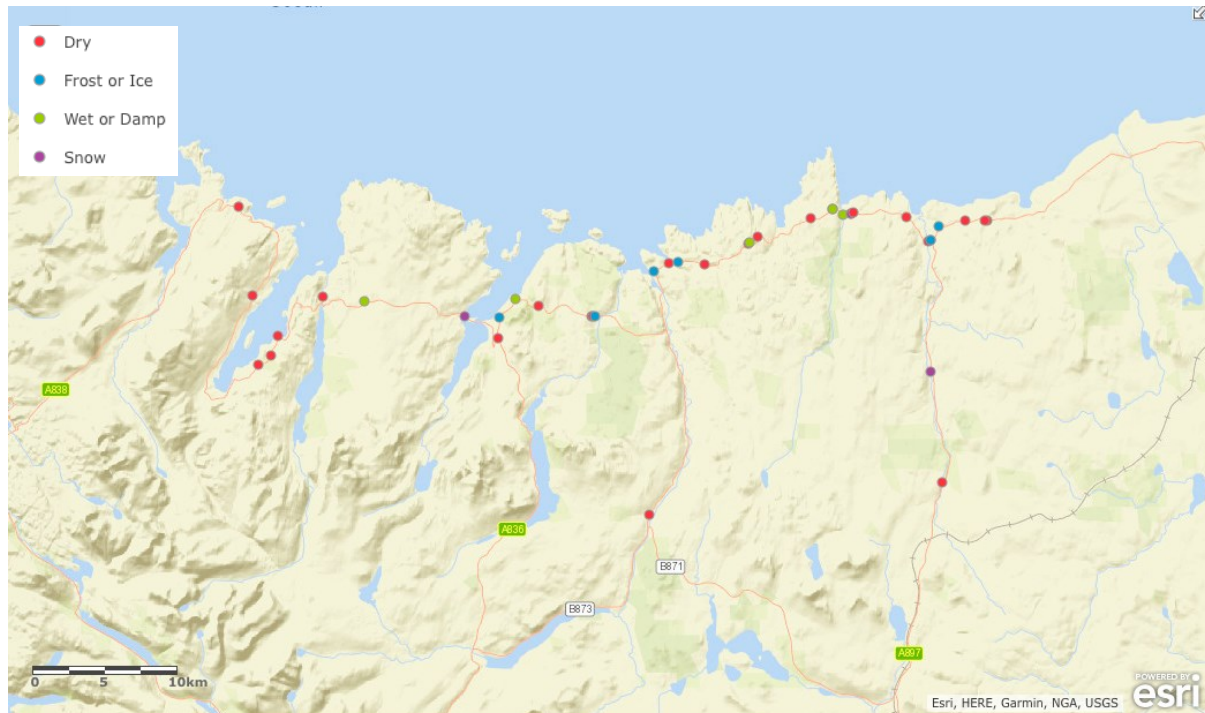


Figure 4: Road traffic accidents reported to the Police 2010-2016¹⁴ by road condition.

A few survey respondents and interviewees indicated that they would be unwilling to travel to the new facility but most were quite accepting of the change.

There will be people who will say I'm not driving to Tongue ... but when push comes to shove everybody needs to work and some people who work you don't really have to, but it suits them. By and large when people have to work, people have to work.

Travel would appear not to be a major issue, but it is clear that a number of staff in the east of the area will consider moving to other employment rather than the additional travel west. This could lead to issues in the period leading up to the relocation. However more could be done to the road infrastructure to support its safe use.

Recommendation1: Pressure should be put on Highland council to maintain and improve roads (especially between Bettyhill and Tongue) and improve signage to encourage better behaviour by those unfamiliar with single track roads.

¹⁴ Department of Transport <https://data.gov.uk/dataset/road-accidents-safety-data>

Recruitment

Divergent views were expressed over recruitment with many negative views linked to a reluctance to change. Local recruitment will draw on relatively small populations, but with limited job opportunities in the area many of which are seasonal, the views expressed indicated that there is an available pool to recruit from. Data from the 2011 census indicates a population of around 1700, see figure 5.



Figure 5: Population counts of census areas along the North Coast of Sutherland¹⁵

... there's plenty of people that want the work it just has to be set up in such a way that it is accessible and if they commit to it they're not just gonna get two hours a week but they gonna get a reasonable wage out of it.

Just over 50% of the care staff who responded to the survey had always lived in the area or had moved back to the area having previously lived there, the remainder had chosen to move in from other areas.

A young ... just returned back ... obviously people will take the jobs if the jobs are there and they're worthwhile and they get decent pay that reflects their skills and the commitment and also for young they want to be able to see some clear progression.

One respondent commented that school rolls were increasing and took this as an indication of an increase in the working age population, though another respondent was concerned that some primary schools in the area were likely to close.

but now it's young families the school will show you just how many young families think this is a nice place to live

¹⁵ Census data 2011

There was criticism as to how the recruitment process had been operated in the past, this provided an explanation as to some of the recruitment difficulties in recent years. The recruitment records demonstrated that for a number of the social care posts, appointments were not made and the post had to be re-advertised.

The issues that were raised were:

Location of the advert:

- Local adverts and word of mouth were the main routes by which local staff were made aware of job opportunities. When adverts were placed on internet recruitment sites (NHS Scotland and Local Government sites) potential local applicants tended to be unaware of the opportunities and in many cases unable to access the information due to poor or absent internet connection.
- Local advertising has redressed this issue, 'getting the word out' to the local community. In consequence, recent recruitment has been more successful.
- More senior, nursing and advanced practice posts need to engage with a wider field of potential applicants and need to be advertised across Scotland and the rest of the UK. One participant summed this up succinctly:
... advertising just in 'my jobs Scotland', no one in England's looking at 'my job Scotland', my view is why do incomers come and live here and it's because of what's here, so why aren't they advertising for jobs in SMC, Kayak magazines Scuba diving, birdwatching ...
.... Advertising out with you would be advertising a lifestyle small school swimming pool next door you know the ability to go to the beach to do some hillwalking to do some climbing

There is no doubt that recruitment to Nursing positions is a challenge due to the UK wide lack of Nurses and Nurses in training. There is no reason why recruitment in Highland should be more challenging than other areas of Scotland and the UK.

For all posts treating recruitment more as a marketing exercise than an HR exercise with analysis of the potential 'market' of applicants and targeting the advertising towards this market, should help.

Nature of the recruitment process

- In configuring replacement posts there has been a tendency to downgrade and reduce hours, presumably to accommodate cost savings, whilst the role remains the same or similar.
One left on a matter of principle should be doing the job as a maternity relief and then the post came up on that same level she had her SVQ2 working on 3 and the job was downgraded and she chose not to take it.
- Many respondents to the survey reported the information given was useful and they found the interview process handled well. Some respondents felt that the recruitment process put people off applying:
I have come across people who would be excellent but would never pass that sort of interview, it's almost as if it stacked against getting the kind of people in that you'd want and that's a hurdle that I see people tell me about.
- Advertising fixed term posts or zero hours contract posts which do not offer sufficient remuneration to make the job financially viable.
Need more permanent contracts to allow staff to get mortgages, be able to live in the area.

There has clearly been a conflict between maintaining service and working within budget in the recent years. Whilst some savings may be made in this way it comes to a point where the pressure

on staff becomes excessive and their health may suffer. Failing to recruit to a post will have the benefit of making gap savings, but does not support the service.

One of the survey respondents commented: *I enjoy my job but with all the added pressures of staffing shortages and a possible move it has become less enjoyable as am starting to feeling the pressures of all that's going on rather than just doing my job.*

Around half of the survey respondents had other employment, voluntary or paid in addition to work at the care home. Suggestions were made in the interviews around using marketing strategies to encourage interest from applicants further afield, perhaps relevant to more senior health and social care posts.

The recruitment process was reported as very positive by the majority of survey respondents, though some concern was expressed around the delays in taking up the post following interview.

yes and people that apply for a job cannot afford to wait, in one of the interviews it was 10 weeks and people cannot be without money and then it was another month after they're employed before they get money and then they go to violence and aggression and manual handling courses at Inverness and they take another month after they've started to be paid for their mileage. So they could improve that certainly they could improve that and people can't wait for those jobs and so they moved on to other areas or moved away, so it could be speeded up.

Further points were made about ways in which the interest of applicants who were not successful could be maintained and encouraged to apply for later opportunities.

Also community links, work experience and placement opportunities were seen as beneficial in encouraging people into this area of work.

Need more promotion in schools and colleges to get young people to apply for jobs - help them through SVQ levels and more students sent out from college to do more work experience

Recommendation 2: Continue to adapt the advertisement and recruitment process to the local and more distant pools of potential applicants.

Retention

Two thirds of the survey respondents were over 50 and most respondents expressed satisfaction with the work they were undertaking.

I am very happy in my work.

I love that my job is in such a small, intimate setting, where everybody knows each other well and we can therefore meet the needs of our lovely residents

Though some concerns expressed by staff over how they were valued, this was evident through:

1. The concern expressed over pay and remuneration;
2. Appointments on fixed term contracts;
3. The support for the professional nature of the health and social care work;
4. The dominance of the cost cutting climate that leads to posts being downgraded whilst the same level and responsibility of work is maintained.

I don't think staffing would be an issue if the pay & contracts were sensible & attractive. Plenty people in area to work, unsure as why they wouldn't as such but maybe more appealing jobs in the new build will help

Flexibility within the work pattern, where possible, was appreciated. Exploring ways in which further flexibility could be introduced, adapting but not compromising the service, could make retention easier.

So the flexibility about working around family and young children also the flexibility about being up to take someone on as a relief worker so that they could see the place get a feel for it, you would hope that this is career progression.

Views were expressed that a number of the Melvich staff would look for more local work in the period up to the move rather than travel, this may lead to staffing challenges leading up to the transition.

It's been going on for so long uncertainty is an issue now

Recommendation 3: Explore ways in which the value of staff can be acknowledged and supported through security of contract, remuneration and status.

Recommendation 4: Proactively plan and manage staffing during the transition period.

Development

Training and development opportunities were mainly focussed on meeting the requirements for the roles (SVQs and mandatory training). Whilst they were acknowledged as requirements to meet the role they were endured rather than enjoyed.

I did not enjoy the SVQs as I think both staff and residents would benefit more from more practical training. Although there have been ""bits"" in the SVQ that were helpful as they made me think about things or reflect on my work

The SVQs are maybe not the best way to encourage staff they can be quite tortuous to great idea but some of the structure around it can be quite difficult to understand. Flexible approach to study with a bit more focus on help from within the group

Some interest was expressed in wider development opportunities, but were often challenged by the time required to travel and attend more distant locations, whilst maintaining service delivery.

More dementia training, both to refresh and to learn new things

I had to travel long distances from Caladh Sona to Inverness approx. 180 miles there and back Wick 80 miles return etc. and some in house training

Recommendation 5: Explore the possibility of more local delivery / access to training and learning to encourage staff to develop in place.

Conclusion

Recruitment in the health and social care sector nationally is challenging at all levels, demand exceeds supply. However, in the context of the small population on the North Coast of Sutherland, both opinion and evidence suggest that a pool of people exist who can be attracted into these posts. Recruitment will require imaginative approaches to encourage applications, both local and from wider afield. Retention of existing and new staff will require an environment which values and supports their work at all levels and develops their potential. In essence achieving the characteristics of a high performing organisation:

- The place people want to work, (Employer of choice),
- The place people want to live, (Supplier of choice)
- The place people want to fund, (Investment of choice)¹⁶

In terms of the area:

It's a fantastic place to have a family, my hobbies - Hillwalking, horse riding, and crofting, It is unique, unspoilt, friendly and fairly quiet.

Summary of recommendations:

Recommendation 1: Pressure should be put on Highland council to maintain and improve roads (especially between Bettyhill and Tongue) and improve signage to encourage better behaviour by those unfamiliar with single track roads

Recommendation 2: Continue to adapt the advertisement and recruitment process to the local and more distant pools of potential applicants.

Recommendation 3: Explore ways in which the value of staff can be acknowledged and supported through security of contract, remuneration and status.

Recommendation 4: Proactively plan and manage staffing during the transition period.

Recommendation 5: Explore the possibility of more local delivery / access to training and learning to encourage staff to develop in place.

¹⁶ Blanchard (2007), Leading at a higher level, Prentice Hall, London.